

## INDIANA PETITION OF NOMINATION FOR FEDERAL, STATE, STATE LEGISLATURE OR LOCAL OFFICE State Form 36186 (R12/6-05) Indiana Election Commission (IC 3-8-6-5) COUNTY:\_\_\_\_\_\_

(CAN-19)

COUNTY:

016						
INSTRUCTIONS: This petition is used to nominate independent candidates or candidates of a minor political party not already entitled to have its candidates placed on the ballot. Petitioners are not required to provide precinct and congressional district information. The county voter registration office will complete this information after the petition is filed. Each candidate must also complete a Candidate's Consent form (CAN-20). The political party affiliation, if any, of each candidate with any other candidate or group of candidates is set forth on the CAN-20 form. This petition must be filed with the appropriate county voter registration office for processing no later than NOON, June 30, 2006. School Board Candidates should use a CAN-34 form, not this form.						
TO THE SECRETARY OF STATE OF INDIANA OR THE INDIANA ELECTION DIVISION OR THE COUNTY CIRCUIT COURT CLERK:  Each of the undersigned represents that: 1) the individual resides at the address after the individual's signature; 2) the individual is a duly qualified registered voter in Indiana and 3) the individual desires to be						
able to vote for the candidates listed below; and each of the undersigned respectfully requests you to place the following names legally qualified candidates on the November 7, 2006 General Election Ballot as						
(check only one box please) independent candidates or as candidates on the Party ticket.						
Candidate Name (as established on CAN-20 form) Complete Candidate Address (If different from residence, include mailing address) Office Sought						
1	Insert here any					
2	political party device to be printed on the					
3	ballot under IC 3-8-7-11					
4	1000777					
DATE OF	Office Use					

	SIGNATURE	PRINTED NAME First Last	DATE OF BIRTH MM/DD/YYYY	RESIDENCE ADDRESS (No P.O. Boxes) Number Street Apartment	CITY or TOWN & ZIP CODE	Office Use Only Precinct/Ward	Office Use Only Congress District
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

County Voter Registration Office Certification							
County:		Number of Valid Signatures:					
I certify that, in	I certify that, in accordance with IC 3-8-2-9, I have reviewed the registration records of the petitioners on this petition and certify the above number to be registered voters of this County.						
		Number of Voters	Congressional District				
Lalso certify t	the following Congressional District breakdown of petitioners on this petition						
	stered voters:						
	Witness my/our hand and seal this						
	day of						
		COUNTY SEAL HERE					
	, 2006, at	SEAL	HERE				
	, Indiana.						
Signature 1		☐ Clerk of the Circuit Court or					
		☐ Member of the Board of Registration					
Signature 2		☐ Member of the Board of Registration					
	County Votor Pogistra	tion Office Certification					
0	County Voter Registra						
County:		Number of Valid Signatures:					
I certify that, in	accordance with IC 3-8-2-9, I have reviewed the registration records of the petitioners on						
		Number of Voters	Congressional District				
I also certify the following Congressional District breakdown of petitioners on this petition							
	the following congressional district breakdown of petitioners on this petition						
who are regis	stered voters:						
who are regis							
who are regis							
who are regis	Witness my/our hand and seal this						
who are regis	Witness my/our hand and seal this day of	COU					
who are regis	Witness my/our hand and seal this	COU SEAL					
who are regis	Witness my/our hand and seal this day of						
who are regis	Witness my/our hand and seal this day of, 2006, at						
	Witness my/our hand and seal this day of, 2006, at	SEAL					